

Bureau of Land #24
Remedial Project Management Section
P.O. Box 19276
Springfield, Illinois 62794-9276

FOR ILLINOIS EPA USE: 167895

LOG NO. _____

☐ \$500 Advance Partial Payment Included

☐ DRM-2 SRP Form Included

☐ DRM-3 Request for Assessment Included

Site Remediation Program Application and Service Agreement (DRM- 1)

I. Site Identification:

Site Name: SAUGET AREA #1 SITES

Street Address: VARIOUS IN CAHOKIA AND SAUGET

City: SAUGET/CAHOKIA

ZIP Code: N/A

County: ST. CLAIR

Approximate Size of Site (Acres): UNKNOWN

Illinois Inventory I. D. Number: SEE ATTACHED

U.S. EPA I.D. Number: _____

Site Base Map Attached? Yes: X No: _____ Legal Description Attached? Yes: _____ No: X Illinois EPA Permit(s): _____

II. Remediation Applicant:

Applicant's Name: M. A. PIERLE

Title: VICE PRESIDENT

Company: MONSANTO COMPANY

Street Address: 800 NORTH LINDBERGH BOULEVARD

City: ST. LOUIS

State: MO

ZIP Code: 63167

Phone: 314-694-6370

FEIN or SSN: _____

I hereby certify that I am authorized to sign this application and service agreement. I certify that the proposed project meets the eligibility criteria set forth in Section 58.1(a)(2) of the Environmental Protection Act (415 ILCS 5/58.1(a)(2)) and regulations promulgated thereunder and that this submittal and all attachments were prepared at my direction. In consideration for the Illinois EPA's agreement to provide (subject to applicable law, available resources, and receipt of the advance partial payment) review and evaluation services for activities carried out pursuant to Title 17 of the Illinois Environmental Protection Act (415 ILCS 5/58-58.12), I agree to:

- (1) Conform with the procedures of Title 17 of the Illinois Environmental Protection Act (415 ILCS 5/58 - 58.12) and implementing regulations;
- (2) Allow for or otherwise arrange site visits or other site evaluation by the Illinois EPA when requested;
- (3) Agree to pay any reasonable costs incurred and documented by the Illinois EPA in providing such services; and
- (4) Make an advance partial payment to the Illinois EPA for such anticipated services provided in Section IV of this application.

As the Remediation Applicant, I understand that I may terminate this service agreement at any time, by notifying the Illinois EPA in writing that services previously requested under the service agreement are no longer wanted. Within 180 days after receipt of the notice, the Illinois EPA shall provide me with a final invoice for services provided until the date of receipt of such notification.

To the best of my knowledge and belief, this request and all attachments are true, accurate and complete. I hereby certify that I have the authority to enter into this agreement.

Remediation Applicant's Signature: _____

Michael A. Pierle
Date: 3/31/97

Owner's Name: VARIOUS PROPERTIES (SEE ATTACHED REPORT)
Title: _____
Company: _____
Street Address: _____
City: _____ State: _____ ZIP Code: _____ Phone: _____

I hereby certify that the Remediation Applicant has my permission to enroll the site identified in Section I of this application into the Illinois EPA Site Remediation Program. I certify that the Remediation Applicant or designated representative has permission to enter upon the indicated premises to conduct remedial investigations or remediation.

Owner's Signature: _____ Date: _____

IV. Advance Partial Payment:

The Remediation Applicant shall identify which advance partial payment plan is selected:

- ☒ Plan 1: A \$500 advance partial payment is included with this application. Please make the check payable to: "Treasurer, State of Illinois". Please include "Hazardous Waste Fund" and the Remediation Applicant's FEIN or SSN on the check; or
- ☐ Plan 2: Request the Illinois EPA determine the appropriate partial payment (i.e., one-half of the total anticipated costs of the Illinois EPA or \$5,000, whichever sum is less). Information on Form DRM-3 ("Request for Assessment of Advance Partial Payment for Anticipated Services") must accompany this application in order for the Illinois EPA to determine the appropriate advance partial payment specific to the services requested.

NOTE: Statutory restrictions prevent the Illinois EPA from refunding payments. Payment under Plan 1 accelerates the review process but increases the risk of forfeiting the payment if the applicant is ineligible. Payment under Plan 2 may result in a larger advance partial payment when a final determination is made on the application.

V. Project Objectives:

Identify the anticipated scope of site investigations and remediation (e.g., cleanup of property for potential transfer or sale; resolution of liability for a release of a specific hazardous substance, petroleum or pesticide, etc.) and the nature of the release being sought from the Illinois EPA:

TO STUDY THE AREA 1 SAUGET SITES TO DETERMINE THE NEED FOR AND SCOPE OF POTENTIAL
REMEDATION NECESSARY TO OBTAIN A NO FURTHER REMEDIATION DETERMINATION

Anticipated Schedule through Completion Attached? Yes: X No: _____

***** If this application contains plans and reports for review and evaluation by the Illinois EPA, Form DRM-2 must also accompany this submittal.**

The Illinois EPA is authorized to require this information under 415 ILCS 505 and regulations promulgated thereunder. Disclosure of this information is required. Failure to do so may prevent this form from being processed and could result in your application being rejected. This form has been approved by the Permit Management Center. All information submitted as part of this Application available to the public except when specifically designated by the Remediation Applicant to be treated confidentially as a trade secret or secret process in accordance with Section 7(b) of the Environmental Protection Act, applicable Rules and Regulations of the Illinois Pollution Control Board and applicable Illinois EPA rules and guidelines.

**ATTACHMENT TO SITE REMEDIATION PROGRAM APPLICATION
AND SERVICE AGREEMENT (DRM-1)**

SAUGET AREA 1 SITES

EPA ID NUMBERS:	Dead Creek Area G (Sauget I)	-	ILD 981 953 623
	Waggoner Trucking Company	-	ILD 984 809 269
	H.H. Hall Excavation Pit	-	ILD 984 809 251
	H.H. Hall Construction Co.	-	ILD 982 973 603
	Dead Creek Segment A (Sauget I)	-	ILD 984 809 277
	Dead Creek Segment B	-	ILD 980 792 006
	Dead Creek Segments C-F (Sauget I)	-	ILD 984 809 285
	Sauget Monsanto Illinois Landfills	-	ILD 980 614 176

Site Remediation Program Form (DRM-2)
(To Be Submitted with all Plans and Reports)

I. Site Identification:

Site Name:	SAUGET AREA#1 SITES		
Street Address:	VARIOUS IN CAHOKIA AND SAUGET		
City:	SAUGET /CAHOKIA	Illinois Inventory I. D. Number:	SEE ATTACHED

II. Remediation Applicant:

Applicant's Name:	M. A. PIERLE	Company:	MONSANTO COMPANY
Street Address:	800 NORTH LINDBERGH BOULEVARD		
City:	ST. LOUIS	State:	MO
ZIP Code:	63167	Phone:	314-694-6370
I hereby certify that the Illinois EPA has my permission to review and evaluate the attached project documents in accordance with the terms and conditions of the review and evaluation services agreement.			
Remediation Applicant's Signature:	<i>Michael A. Pierle</i>		Date: 3/31/97

II. Contact Person:

Name:	MIKE LIGHT
Company:	MONSANTO COMPANY
Street Address:	800 NORTH LINDBERGH BOULEVARD
City:	ST. LOUIS
State:	MO
ZIP Code:	63167
Phone:	314-694-6370

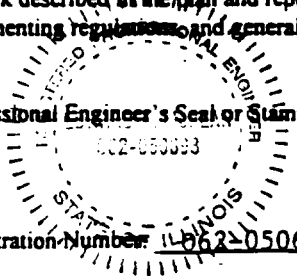
III. Review & Evaluation Licensed Professional Engineer (opt.)

Name:	N/A
Company:	
Street Address:	
City:	
State:	
ZIP Code:	
Phone:	

IV. Project Documents Being Submitted:

Indicate all that apply:	
<input type="checkbox"/> Phase I Environmental Assessment Report	<input checked="" type="checkbox"/> Sampling Plan
<input type="checkbox"/> Site Investigation Report - Comprehensive	<input type="checkbox"/> Health & Safety Plan
<input type="checkbox"/> Site Investigation Report - Focused	<input type="checkbox"/> Community Relations Plan
<input type="checkbox"/> Remediation Objectives Report	<input type="checkbox"/> Risk Assessment
<input type="checkbox"/> Response Action Plan	<input type="checkbox"/> Contaminant Fate & Transport Modeling
<input type="checkbox"/> Remedial Action Completion Report	<input type="checkbox"/> Other - Title: _____

V. Professional Engineer's Seal or Stamp:

I attest that all site investigations and remedial activities were performed under my direction and this document and all attachments were prepared under my direction or reviewed by me, and to the best of my knowledge and belief, the work described in the plan and report has been designed or completed in accordance with the Illinois Environmental Protection Act (415 ILCS 5), implementing regulations and generally accepted engineering practices, and the information presented is accurate and complete.	
Engineer Name: Edward A. McBean	
Company: CRA Engineering Inc. Phone: 519-884-0510	
Signature: <i>Edward A. McBean</i>	
Registration Number: 062-050693	
License Expiration Date: November 30, 1997	

All information submitted is available to the public except when specifically designated by the Remediation Applicant to be treated confidentially as a trade secret or secret process in accordance with Section 7(a) of the Environmental Protection Act, applicable Rules and Regulations of the Illinois Pollution Control Board and applicable Illinois EPA rules and guidelines. The Illinois EPA is authorized to require this information under 415 ILCS 5/58 and regulations promulgated thereunder. Disclosure of this information is required. Failure to do so may prevent this form from being processed and could result in your application being rejected. This form has been approved by the Forms Management Center.